KENTUCKY DEPARTMENT OF FISH AND WILDLIFE RESOURCES ANGLER AWARDS PROGRAM TROPHY FISH/MASTER ANGLER AWARD APPLICATION

Name of Angler:			Middle
ast 6 numbers)	If exempt, SSN:		
	Date Caught:_		
	_ County:		
	_		
hes (nearest ½)	Weight	lbs _	OZ
rdance with the official	rules governing Ke	entucky's Angle	r Awards Program."
	Date		
series of three different	species for which	you have not b	
Date	L	ength	Weight
Date_		_ Length	Weight
Date		Length	Weight
	Phone: Cast 6 numbers	Phone:	Phone:

Complete form and return to: Trophy Fish/Master Angler Coordinator, Kentucky Department of Fish and Wildlife Resources, #1 Sportsmen's Lane, Frankfort, KY 40601. One application per fish. See back of application for rules and length requirements.